PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

SHP-P7079

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TC	OTAL CLAIMS	, — ——	21	21			}	RATE	FEE	7	RATE	FEE
FC)R			NUMBER FILED		NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
то	TAL CHARGE	ABLE CLAIMS	2/mir	2/minus 20=		* /		X\$ 9=		OR	X\$18=	18
INC	DEPENDENT CI	LAIMS	,3 mi	3 minus 3 =		* &		X43=		OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=	
* If	the difference	e in column 1 is	less than ze	∍ro, enter	"0" in c	column 2	ı	TOTAL	,	OR	TOTAL	288
	С	LAIMS AS A	MENDEC) - PAR	TII					4	OTHER	THAN
		(Column 1)		(Colum		(Column 3)	· _	SMALL		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL AIRA	=] [X43=		OR	X86=	
	FIRST PRESE	ENTATION OF ML	JLIIPLE UCF	FNDEINI	CLAlivi] [+145=		OR	+290=	
							L	TOTAL		00	TOTAL	
		(Column 1)		ODIT. FEE		J ,	ADDIT. FEE					
_		CLAIMS		(Colum	EST	(Column 3)	1 6		ADDI-	1 1		ADDI-
ENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total .	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	C! AIN	=	1 [X43=		OR	X86=	
1	FIRST FRESE	NIATION.OF WIL	ETIPLE DET	ENDEM	CLAIIVI		, [+145=		OR	+290=	
								TOTAL DDIT. FEE		00	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA:]	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON I	Total ·	*	Minus	**	i	= .		X\$ 9=		OR	X\$18=	
YWE	Independent	*	Minus	***		=]	X43=		OR	X86=	
<u>`</u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM.									Un		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	-
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL ADDIT. FEE	
T	he "Highest Num	mber Previously Paid ther Previously Paid	d For IN Imis d For" (Total or	Independe	less than nt) is the	n 3, enter 3. highest numbe	er foun	d in the appr	opriate box			